# APPLICATION # 1

Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury. And upon indictment and conviction thereof shall be subject to penalties provided by law for that crime.

### STATE OF MARYLAND | MONTGOMERY COUNTY APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE 1 4249

(PLEASE PRINT OR TYPE IN INK)

To the Board of License Commissioners for Montgomery County:

OCT 11 '23 PM 1:42

Application is made by the undersigned under the provisions of Alcoholic Beverages Article of the Annotated Code of Maryland, for an alcoholic beverage license and each applicant submits and certifies to the following information required by said article.

<b>SECTION 1: LICENSE TYPE INFOR</b>	MATI	ON					
A. Nature of Application:		□ New Licen	w License 🗆 Transfer of Location 🗖 Transfer of Ownership 🗅 Reclassification				
B. Entity on Whose Behalf Applicati	on is	□ Corp	☐ Corporation ☐ Limited Liability Company ☐ Partnership ☐ Individual				
Made:							
C. Class of License Applied For:			D. Entity Name:	1 1 0			
BBWLHR			AEMT				
E. Types of Permits Applied For:		□ Tast		Outdoor Café  Refillable Container			
(See Appendix A) OUT 200 Y	ery-	2	□ Retail Delivery □ Sp	irits for Cooking □ Wine Corkage			
F. Trade Name of Facility:		AYY		/G. Is Business a Franchise? ☐ YES NO			
H. Address of Facility to be Licenses	(No P.	O.Box):		N. D.			
2558/2563	-Nnr	uls Auci	wheaton/	MD 20902			
ι			1				
<b>SECTION 2: APPLICANT INFORM</b>	ATION	V	· · · · · · · · · · · · · · · · · · ·				
Applicant A Name:	Birtho	date:	Personal Phone Num	nber:			
Dino & WICA	11/	20/1994	H:	c: (240) 706-5460			
Full Address:		silver skin	Years at this Address	· ·			
	CY	Dr. MD 20906	16 400KS	16 Years			
Email Address:	Sex:	$\sim$	Place of Birth:				
Dino Juica 1994 Dicloub.	On		Zouna	Terv			
If applicant is foreign-born, state:			-				
Immigration Card Number:		f Naturalized, City Bal Tingor		Date of Naturalization:			
Applicant B Name:	Birtho	date:	Personal Phone Num	nber:			
			H: .	C:			
Full Address:			Years at this Address	s: Years as Maryland Resident:			
Email Address:	Sex:		Place of Birth:	,			
If applicant is foreign-born, state:							
Immigration Card Number:	T	f Naturalized, City	/State:	Date of Naturalization:			
			, 55555				
Applicant C Name:	Birtho	date:	Personal Phone Num	nber:			
			Н:	С			
Full Address:			Years at this Address	s: Years as Maryland Resident:			
Email Address:	Sex:		Place of Birth:				
If applicant is foreign-born, state:			-				
Immigration Card Number:	11	f Naturalized, City	/State:	Date of Naturalization:			
		,,					

### . (NOTE: COMPLETE ONLY ONE SECTION FOR SECTIONS 3, 4, OR 5, AS APPLIES)

SECTION 3: CORPORATION INFORMA	ATION			
A. Qualifying Maryland Resident (Indicat	te with X)		☐ Applicant A ☐ A	Applicant B □ Applicant C
B. Name and Full Address of Corporation	າ:	1,*		
C. Incorporated Under State Laws of:			D. Month and Y	ear:
c. meorporated officer state Laws of.				
E. Authorized Capital:	F. Number of Shar	es Authorized:	G. Number of Sl	nares Issued:
Stockholders (Include all layers equaling 1	.00% owned by indiv	iduals and/or pub	licly traded, use ad	ditional sheet if necessary)
Name (A):	Full Address:		Shares Owned:	
Name (B):	Full Address:			Shares Owned:
Name (C):	Full Address:			Shares Owned:
Corporate Officers:				
Name (A):	Full Address:			Title:
Name (B):	Full Address:			Title:
Name (C):	Full Address:			Title:
SECTION 4: LIMITED LIABILITY CORPO	ORATION INFORM	IATION		,
A. Qualifying Maryland Resident (Indicat			nplicant A □ Applic	ant B □ Applicant C
B. Name and Full Address of LLC: 2559 Ennalls AVE Silver SPI		0.0.11	Persons of LLC	
ASI 00 mi tierra He	HEMT	Dino G		50/47
D. Organized Under State Laws of:	LLC	E. Month and		
Percentage of Ownership Interest of LLC (	llaa additianalahaat		2023	
Name (A):	Full Address:	. II fiecessary).	20866	Percentage:
DINO & JUICA RULAD	12410 Down		am minge	Percentage: 90
Name (B): Utcenter florecin	Full Address;	(wood312:2	11/Ver Sprins	Percentage:
Name (C):	Full Address:			Percentage:
SECTION 5: PARTNERSHIP INFORMA	TION			
A. Name and Full Address of Partnership				
C. Date on Which Partnership was Forme				
Percentage of Ownership Interest of Partr	nership (Use additio	nal sheet if necess	ary):	
Name (A):	Full Address:			Percentage:
Name (B):	Full Address:			Percentage:
Name (C):	Full Address:			Percentage:
Indicate Who are the General Partners:		□ Applicant A	☐ Applicant B ☐ Ap	plicant C
Indicate Maryland Residents:		☐ Applicant A	☐ Applicant B ☐ Ap	plicant C

SECTION 6: ESTABLISHMENT INFO								
A. Detailed description and total square footage of the portion of the building for which license is sought (ex. Free standing,								
located in strip mall, restaurant, seating, beer/wine, etc.):								
1,312 \$ 1,258 = 2,570 KRSTAULANT								
B. Who Will be in Charge of Day-to-Da	P	ROJAS						
C. Phone Number of Establishment:  D. Type of Facility/Facility Concept:  PENNAN RESTAURANT								
E. Date Applicant will Begin to Operate: F. Days and Hours of Operation:								
10 pm								
10/5/2023 9:00 AM TO: 2:00 AM \$510AN								
		7:00 AM 10:	BUNDAN					
SECTION 7: LICENSE TRANSFER (CO		ONLY IF TRANSFERRING A						
A. Names of all Current License Holder			B. Date Facility Began Oper	ating:				
1) Patriesa Garcia	3)		10/2010					
C. Location of Current Licensed Facility		D. Location to Which License	is Being Transferred:	-				
2559/2563 chnalls aus	cf.	/ 0	14/2023					
SECTION 8: LEASED PREMISES								
A. Name of Property Owner:	B. Phone	e Number of Property Owner:	C. Full Address of Property Owne	er:				
triangle park associates	701	657 2525	4901 fair mont AVE BE	thesda				
LP ZLLP	301	5) ( 20 - 0	MD 20814 Unit 201					
D. Date Lease Made:			E. Date Lease Expires:	, –				
April 17 7020			November 30 202	S				
F. State Renewal Options, if any:								
SECTION 9: APPLICANT QUESTION	AIRE							
Has any applicant ever been:			š					
1. Convicted of a felony?				□ YES ■ NO				
2. Found guilty of violating the laws go	verning t	he sale of alcohol in the State o	of Maryland or the United States?	□ YES NO				
3. Found guilty of violating the laws for	r prevent	ion and gambling in the State o	f Maryland or the United States?	' YES INO				
4. Found guilty of any offense against t	he laws o	of the State of Maryland or the	United States other than a minor	□ YES □ Ne				
traffic offense?								
5: Has any applicant ever had a license			ended or revoked?	□ YES □ NO				
6. Has any applicant ever had a license for the sale of alcoholic beverages?								
If YES, state name of applicant, name of	of facility,	address for which license was	held, and the dates for which it w	as held:				
7: Does any applicant or person with a	n owner	ship interest in this facility hav	e a financial interest in any other					
facility in Montgomery County or the State of Maryland where an alcoholic beverage license has been applied								
for, granted, or issued under the Alcoh								
If YES, state the name of the applican	t, name a	and address of licensed premis	es and ownership and add the da	tes the license				
was held:								
8: Does any person other than the ap	oplicant(s	i) have any financial interest i	n this alcoholic beverage license	□ YES □ NO				
applied for, or in the facility to be cond								
If YES, state name and the financial interest owned:								

### **SECTION 10: CERTIFICATES AND SIGNATURES**

Address of Property Owner

21. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has is a resident and taxpayer of the State of Maryland; and further certifies that no manufacturer, brewer, distiller or wholesaler has any financial interest, directly or indirectly, in the premises or facility of the applicant; that the applicant will not hereafter conveyor grant to such manufacturer, brewer, distiller, or wholesaler any such interest; and that the applicant at the time of making this application has no indebtedness or other financial obligation and will not hereafter incur any such indebtedness or financial obligation to any manufacturer, brewer, distiller, or wholesaler.

Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as, to the rules and regulations of the Board of License Commissioners for Montgomery County, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.

Affidavit:
"By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief."
(A) Dino Erick Juica Rojas
Signature of Applicant
(B)
Signature of Applicant
(C)
Signature of Applicant  (D)
(FOR CORPORATION APPLICATIONS ONLY) Corporate President Signature
alcoholic beverage license and that I hereby consent to the use of the said property for the sale thereon of such alcoholic beverages as may be permitted by law, and I do hereby grant permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.
Affidavit:
"By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief."
Signature of the Property Owner
Leonard A. Greenberg
Printed Name of Property Owner
4901 Fairmont Ave Bethesda Md. 20814 #201
Address of Property Owner Phone of Property Owner

3016572525

# APPLICATION # 2

Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury. And upon indictment and conviction thereof shall be subject to penalties provided by law for that crime

# STATE OF MARYLAND | MONTGOMERY COUNTY APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

(PLEASE PRINT OR TYPE IN INK)

### To the Board of License Commissioners for Montgomery County:

Application is made by the undersigned under the provisions of Alcoholic Beverages Article of the Annotated Code of Maryland, for an alcoholic beverage license and each applicant submits and certifies to the following information required by said article.

SECTION 1: LICENSE TYPE INFORI	MAT	ION		# 1095432			
A. Nature of Application:		□ New Licen	☐ New License ☐ Transfer of Location ✓ Transfer of Ownership ☐ Reclassification				
B. Entity on Whose Behalf Application	on is	□ Corp	☐ Corporation 🗷 Limited Liability Company 🗆 Partnership 🗆 Individual				
C. Class of License Applied For:			D. Entity Name:	a feart LLC			
E. Types of Permits Applied For: (See Appendix A) Wine Cork	ag	□ Tast	□ Tasting (\$200) Catering □ Oxtdoor Café □ Refillable Container □ Retail Delivery □ Spirits for Cooking ■ Wine Corkage				
F. Trade Name of Facility:	1	Pealond K	estamant	G. Is Business a Franchise? □ YES NO			
H. Address of Facility to be Licensed		P.Ø. Box):	Gaeth Cropine	5 m1 20877			
SECTION 2: APPLICANT INFORMA			0	ę			
Applicant A Name:	Birth	ndate:	Personal Phone Num				
Chan, so Lan	31	20/60	H:	C: 57/ - 04/ - 0/33 :: Years as Maryland Resident:			
Full Address: 13300 Turkey B	ra	ach Ptw	Years at this Address	: Years as Maryland Resident:			
Email Address:	Sex:	Z Rockvill.	Place of Birth:				
If applicant is foreign-born, state:							
Immigration Card Number: 075 - 977 - 373		If Naturalized, City	/State:	Date of Naturalization:			
Applicant B Name:	Birth	ndate:	Personal Phone Num H:	C:			
Full Address:			Years at this Address	: Years as Maryland Resident:			
Email Address:	Sex:		Place of Birth:				
If applicant is foreign-born, state:							
Immigration Card Number:		If Naturalized, City	/State:	Date of Naturalization:			
Applicant C Name: Birthdate:		Personal Phone Number: H: C					
Full Address:			Years at this Address	S: Years as Maryland Resident:			
Email Address: Sex:			Place of Birth:				
If applicant is foreign-born, state:							
Immigration Card Number:		If Naturalized, City	//State:	Date of Naturalization:			

### (NOTE: COMPLETE ONLY ONE SECTION FOR SECTIONS 3, 4, OR 5, AS APPLIES)

#### SECTION 2. CODDODATION INCODMATION

SECTION 3: CORPORATION INFO			
A. Qualifying Maryland Resident (In			☐ Applicant A ☐ Applicant B ☐ Applicant C
B. Name and Full Address of Corpor	ration:	Pest mari	
many kory fee	or sugare	Ruse	Meliot -
16515 Jitte	THE AVE,	Juino	D. Month and Year:
C. Incorporated Under State Laws o	Ti ————————————————————————————————————		D. Month and Year:
E. Authorized Capital:	F. Number of Shares	Authorized:	G. Number of Shares Issued:
L Stockholders (Include all lavers equa	ling 100% owned by individu	als and/or pub	licly traded, use additional sheet if necessary)
Name (A):	Full Address:	المستريقين	Shares Owned:
Name (B):	Full Address:		Shares Owned:
Name (C):	Full Address:	-	Shares Owned:
Corporate Officers:			,10
Name (A):	Full Address:		Title:
Name (B):	Full Address:	41	Title:
Name (C):	Full Address:		Title:
			4
SECTION 4: LIMITED LIABILITY CO	ORPORATION INFORMAT	ION	
A. Qualifying Maryland Resident (In	dicate with X)	□ A	applicant A □ Applicant B □ Applicant C
B. Name and Full Address of LLC:	LLC	thorized I	Persons of LLC
D. Organized Under State Laws of:	mi) Zof7)	Month and	Year: / 2023
Percentage of Ownership Interest of	LLC (Use additional sheet if r	necessary):	
Name (A):	Full Address: 8462		CF Percentage:
Lam, wing min	a Amoundale.	VA 22	100%
Name (B):	Full Address:		Percentage:
Name (C):	Full Address:		Percentage:
SECTION 5: PARTNERSHIP INFO	PMATION	-	
A. Name and Full Address of Partne			
C. Date on Which Partnership was F	Formed: D.	In Which State:	:
Percentage of Ownership Interest of	Partnership (Use additional:	sheet if necess	ary):
Name (A):	Full Address:		Percentage:
Name (B):	Full Address:		Percentage:
Name (C):	Full Address:		Percentage:
Indicate Who are the General Partn	ers:	□ Applicant A	□ Applicant B □ Applicant C
Indicate Maryland Residents:		☐ Applicant A	☐ Applicant B ☐ Applicant C

SECTION 6: ESTABLISHMENT INFORMATION	
A. Detailed description and total square footage of the portion of the building for which license is sought (ex. F	ree standing,
located in strip mall, restaurant, seating, beer/wine, etc.):	4)
Kestaurant, Twalve Thomsand - five Hundre	Thread
B. Who Will be in Charge of Day-to-Day Operations (General Manager):	
Thanh NGO (manager)	
C. Phone Number of Establishment: 8. Type of Facility/Facility Concept:	
301-605-705) Kestauraht	
E. Date Applicant will Begin to Operate: F. Days and Hours of Operation:	
monday to Sunday	
7/./2012	
7/1/2023 /1Am - 10pm	
SECTION 7: LICENSE TRANSFER (COMPLETE ONLY IF TRANSFERRING A LICENSE)	
A. Names of all Current License Holders:  B. Date Facility Began Opera	iting:
1) Ro Lan Chan 3) Thanh Ngo	
C. Location of Current Licensed Facility: D. Location to Which License is Being Transférred:	•
2) Connie Lam  C. Location of Current Licensed Facility:  16515 5 Frederick Ave  D. Location to Which License is Being Transferred:  Which License is Being Transferred:	1
	uess
Gaithersburg mb Juf7) SECTION 8: LEASED PRÉMISES	
A. Name of Property Owner:  B. Phone Number of Property Owner:  C. Full Address of Property Owner  5500 MacArthus	r:
production of the second of th	
properties Inc 202-244-5foo NW Washington	DCN
D. Date Lease Made: E. Date Lease Expires:	
7/1/2023 6/30/2028	
F. State Renewal Options, if any:	
Five years	
SECTION 9: APPLICANT QUESTIONAIRE	
Has any applicant ever been:	
1. Convicted of a felony?	□ YES ☑ NO
2. Found guilty of violating the laws governing the sale of alcohol in the State of Maryland or the United States?	□ YES ☑ NO
3. Found guilty of violating the laws for prevention and gambling in the State of Maryland or the United States?	□ YES □ NO
4. Found guilty of any offense against the laws of the State of Maryland or the United States other than a minor	□ YES □ NO
traffic offense?	
5: Has any applicant ever had a license for the sale of alcoholic beverages suspended or revoked?	□ YES ✓ NO
6. Has any applicant ever had a license for the sale of alcoholic beverages?	□ YES ☑ NO
If YES, state name of applicant, name of facility, address for which license was held, and the dates for which it wa	
The state that the state of the	
7: Does any applicant or person with an ownership interest in this facility have a financial interest in any other	
facility in Montgomery County or the State of Maryland where an alcoholic beverage license has been applied	□ YES ✓ NO
for, granted, or issued under the Alcoholic Beverages Article of the Annotated Code of Maryland?	
If YES, state the name of the applicant, name and address of licensed premises and ownership and add the dat	es the license
was held:	
8: Does any person other than the applicant(s) have any financial interest in this alcoholic beverage license	□ YES NO
8: Does any person other than the applicant(s) have any financial interest in this alcoholic beverage license applied for, or in the facility to be conducted under the current license?  If YES, state name and the financial interest owned:	□ YES NO

### **SECTION 10: CERTIFICATES AND SIGNATURES**

Address of Property Owner

21. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has is a resident and taxpayer of the State of Maryland; and further certifies that no manufacturer, brewer, distiller or wholesaler has any financial interest, directly or indirectly, in the premises or facility of the applicant; that the applicant will not hereafter convey or grant to such manufacturer, brewer, distiller, or wholesaler any such interest; and that the applicant at the time of making this application has no indebtedness or other financial obligation and will not hereafter incur any such indebtedness or financial obligation to any manufacturer, brewer, distiller, or wholesaler.

Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as, to the rules and regulations of the Board of License Commissioners for Montgomery County, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.

Affidavit:			
'By signing this application, I do solemnly declare and affirm un true and correct to the best of my knowledge, information, and	der the penalties of perjury belief."	that the contents	of the foregoing document ar
Signature of Applicant			
(B)			
Signature of Applicant			
(c)			
Signature of Applicant			
(D)			
	(FOR CORPORATION APP	PLICATIONS ONLY)	Corporate President Signatur
be permitted by law, and I do hereby grant permission to the St Board of License Commissioners for Montgomery County, its di County to inspect and search at any and all hours, without warr facility is to be conducted.  Affidavit:  "By signing this application, I do solemnly declare and affirm un true and correct to the best of my knowledge, information, and	uly authorized agents and e rant, the premises and any a nder the penalties of perjury	mployees, and any and all parts therec	peace officer of Montgomery of upon and in which said
Signature of the Property Owner			

Phone of Property Owner





# 4 Messages Landlord Appr...





## **STANDARD** PROPERTIES INC.

SECTION 10: CERTIFICATES AND SIGNATURES	
21. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appered the State of Maryland; and further cartifles that no manufacturer, brawer, indirectly, in the premises or facility of the applicant; but the applicant must the applicant must be applicant; at the time of obligation and will not hereafter incur any such indebteches so of financial obligation and will not hereafter incur any such indebteches or financial obligation.	distiller or wholesaler has any financial interest, directly or to thereafter convey or grant to such manufacturer, frewer, making this application has no indebtedness or other financial pation to any manufacturer, brewer, distiller, or wholesaler.
Each of said applicants hereby centifies further that if the license applied for County laws and regulations relating to the sale of slooholds bewarages, as we license Commissioners for Montgomary County, and herby grants permission deputies, inspectors and derits, the Board of License Commissioners for Mon employees, and any pence officer of Montgomery County to inspect and sea any and all parts thereof upon and in which said facility is to be conducted.	ell is, to the rules and regulations of the Board of n to the State Comptroller, his duly authorized
Affidavit:	
By signing this application, I do solemnly declare and affirm under the penaltic	as of perjury that the contents of the foregoing document are
o on another the best of my knowledge, information, and belief."	
177	
Signature of Applicant	
(B) Signature of Applicant	
(C)	
Signature of Applicant	
(0)	
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the said prope permitted by law, and I do hereby grant permission to the State Comptrolle Board of License Commissioners for Montgomery County, its duly authorized a County to inspect and search at any and all hours, without warrant, the premis	percy for the sale thereon of such alcoholic beverages as may i, his duly authorized deputies, inspectors and clerks, the gents and employees, and any peace officer of Montgomery
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the said proj be permitted by law, and I do hereby and permission to the State Comptrolle Board of License Commissioners for Montgomery Cosiny, its duly authorized a County to inspect and search at any and all hours, without warrant, the premisfacility is to be conducted.  Affidavit:	the property named in the foregoing application for an nerry for the sale thereon of such alcoholic beverages as may , his duly authorized deputies, inspectors and clerks, the gents and employees, and any peace officer of Most gomery est and any and all parts thereof upon and in which said
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the raid prope permitted by taux, and I do hereby grant permission to the State Comptroller Board of License Commissioners for Montgomery Cosmy, its duly authorized a County to inspect and seaich at any and all hours, without warrant, the premisfacility is to be conducted.	the property named in the foregoing application for an nerry for the sale thereon of such alcoholic beverages as may , his duly authorized deputies, inspectors and clerks, the gents and employees, and any peace officer of Most gomery est and any and all parts thereof upon and in which said
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the paid yro per permitted by law, and I do hereby grain permission to the State Comptrolle Board of License Commissioners for Montgomery Cosiny, its duly authorized a County to inspect and season at any and all hours, without warrant, the premisfacility is to be conducted.  Affidavit:  "By signing this application, I do solemnity declare and affirm under the penalse	the property named in the foregoing application for an nerry for the sale thereon of such alcoholic beverages as may , his duly authorized deputies, inspectors and clerks, the gents and employees, and any peace officer of Most gomery est and any and all parts thereof upon and in which said
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the paid yro per permitted by law, and I do hereby grain permission to the State Comptrolle Board of License Commissioners for Montgomery Cosiny, its duly authorized a County to inspect and season at any and all hours, without warrant, the premisfacility is to be conducted.  Affidavit:  "By signing this application, I do solemnity declare and affirm under the penalse	the property named in the foregoing application for an nerry for the sale thereon of such alcoholic beverages as may , his duly authorized deputies, inspectors and clerks, the gents and employees, and any peace officer of Most gomery est and any and all parts thereof upon and in which said
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the paid yro per permitted by law, and I do hereby grain permission to the State Comptrolle Board of License Commissioners for Montgomery Cosiny, its duly authorized a County to inspect and season at any and all hours, without warrant, the premisfacility is to be conducted.  Affidavit:  "By signing this application, I do solemnity declare and affirm under the penalse	the property named in the foregoing application for an nerry for the sale thereon of such alcoholic beverages as may , his duly authorized deputies, inspectors and clerks, the gents and employees, and any peace officer of Most gomery est and any and all parts thereof upon and in which said
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the paid proper permitted by law, and I do hereby grant permission to the State Comptrolle Board of License Commissioners for Montgomery County, its duty authorized a County to inspect and search at any and all hours, without warrant, the premis facility is to be conducted.  Affidient:  "By gigning this application, I do solemnly declare and affirm under the pensist true and correct to the best of my knowledge, information, and belief."	the property named in the foregoing application for an nerry for the sale thereon of such alcoholic beverages as may , his duly authorized deputies, inspectors and clerks, the gents and employees, and any peace officer of Most gomery est and any and all parts thereof upon and in which said
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the paid property be permitted by law, and I do hereby grain permission to the State Comptrolle Board of License Commissioners for Montgomery Cosinty, its duly authorized a County to inspect and aspaich at any and all hours, without warrant, the premisfacility is to be conducted.  Affidavit:  "By signing this application, I do solemnly declare and affirm under the pensists true and correct to the best of my knowledge, information, and belief."  Signature of the Property Owner	the property named in the foregoing application for an nerry for the sale thereon of such alcoholic beverages as may , his duly authorized deputies, inspectors and clerks, the gents and employees, and any peace officer of Most gomery est and any and all parts thereof upon and in which said
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of alcoholic beverage license and that I hereby consent to the use of the sale group be permitted by law, and I do hereby grain permission to the State Comprose Board of License Commissioners for Montgomery County, its duly authorized a County to inspect and search at any and all hours, without worrant, the premis facility is to be conducted.  Affidavit:  "By signing this application, I do solemnly declare and affirm under the penaltic true and correct to the best of my knowledge, information, and belief."  Signature of the Property Owner  JOHN J. AMAGA.  Printed Name of Property Owner	the property named in the foregoing application for an energy for the sale thereon of such alcoholic beverages as may, the clink architecture depoting, inspectors and clerks, the gents and engloyees, and any peace officer of Most gomery ex and any and all parts thereof upon and in which said any and all parts thereof upon and in which said as of perjury that the contents of the foregoing document as
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See More











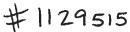
# APPLICATION # 3

Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury. And upon indictment and conviction thereof shall be subject to penalties provided by law for that crime.

### STATE OF MARYLAND | MONTGOMERY COUNTY APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

(PLEASE PRINT OR TYPE IN INK)

Го	the B	Board (	of	License	Commissioners	for	Montgome	ry County:
----	-------	---------	----	---------	---------------	-----	----------	------------



Application is made by the undersigned under the provisions of Alcoholic Beverages Article of the Annotated Code of Maryland, for an alcoholic beverage license and each applicant submits and certifies to the following information required by said article.

SECTION 1: LICENSE TYPE INFOR	MAT	ΓΙΟΝ	_	revised			
A. Nature of Application:			☐ New License ☐ Transfer of Location ■ Transfer of Ownership ☐ Reclassification				
B. Entity on Whose Behalf Applicati Made:	on is	□ Corp	oration 🛎 Limited Liab	ility Company □ Partnership □ Individual			
C. Class of License Applied For: BBWLHR			D. Entity Name: TGOR, LLC				
E. Types of Permits Applied For:				■ Outdoor Café □ Refillable Container			
(See Appendix A)			□ Retail Delivery □ Sp	irits for Cooking Wine Corkage			
F. Trade Name of Facility: Hunters Bar & Grill				G. Is Business a Franchise? □ YES ■ NO			
H. Address of Facility to be Licensed 10123 River Road, Potomac, MD 2	( <b>No</b> 0854	P.O. Box):					
SECTION 2: APPLICANT INFORM							
Applicant A Name:		hdate:	Personal Phone Num	ber: c: 301-792-2326			
Adam Greenberg	10/2	28/1969	H: 301-983-9700 Years at this Address				
Full Address: 8417 Crimson Leaf Court, Potomac	20854	24	54				
Email Address: Adam@potomacpizza.com	; Э	Place of Birth: Washington, DC					
If applicant is foreign-born, state:							
Immigration Card Number:		If Naturalized, City	/State:	Date of Naturalization:			
Applicant B Name:	Birt	hdate:					
Full Address:			H: Years at this Address				
Full Address:			rears at tims Address	s. Tears as Ivial Vialla Resident.			
Email Address:	Sex	•	Place of Birth:				
If applicant is foreign-born, state:							
Immigration Card Number:		If Naturalized, City	/State:	Date of Naturalization:			
Applicant C Name:	hdate:	Personal Phone Num H:	nber: C				
Full Address:		Years at this Address	s: Years as Maryland Resident:				
Email Address:	Sex		Place of Birth:				
If applicant is foreign-born, state:	_						
Immigration Card Number:		If Naturalized, City	//State:	Date of Naturalization:			

### (NOTE: COMPLETE ONLY ONE SECTION FOR SECTIONS 3, 4, OR 5, AS APPLIES)

### **SECTION 3: CORPORATION INFORMATION**

A. Qualifying Maryland Resident (Indicate with X)						
B. Name and Full Address of Corporation	:	`				
C. Incorporated Under State Laws of:			T D	. Month and Ye	22r	
C. Incorporated Onder State Laws Of.	. month and 10	501.				
E. Authorized Capital:	i. Number of Sh	nares Issued:				
Stockholders (include all layers equaling 10	00% owned by individ	uals and/or pu	ublicly	traded, use ad	ditional sheet if necessary)	
Name (A):	Full Address:					
Name (B):	Full Address: Shares Owned:					
Name (C):	Full Address:				Shares Owned:	
Corporate Officers:						
	Full Address:				Title:	
Name (B):	Full Address:				Title:	
Name (C):	Full Address:				Title:	
A. Qualifying Maryland Resident (Indicate B. Name and Full Address of LLC: TGOR, LLC 10220 River Road, Suite 1, F	e with X)	C. Authorized	d Pers	ons of LLC	ant B □ Applicant C	
D. Organized Under State Laws of:	Otomac, MB 20004	E. Month and				
Maryland		06/2023				
Percentage of Ownership Interest of LLC (L		necessary):				
	Full Address: 3417 Crimson Leaf C	ourt, Potomac	c, MD	20854	Percentage: 100	
Name (B):	Full Address:				Percentage:	
Name (C):	Full Address:				Percentage:	
SECTION 5: PARTNERSHIP INFORMAT	ION					
A. Name and Full Address of Partnership:						
C. Date on Which Partnership was Formed	d: D	. In Which Stat	te:			
Percentage of Ownership Interest of Partn	ership (Use additiona	Isheet if neces	ssary):			
Name (A):	Full Address:				Percentage:	
Name (B):	Full Address:				Percentage:	
Name (C):	Full Address:				Percentage:	
Indicate Who are the General Partners:		☐ Applicant	A $\square$ A	pplicant B 🗆 Ap	plicant C	
idicate Maryland Residents:   Applicant A  Applicant B  Applicant C						

A. Detailed description and total square	footage of the portion of the building for which license is sought (ex. Free standing,
located in strip mall, restaurant, seating, Strip Mall 5000 Square Foot Full Service	
B. Who Will be in Charge of Day-to-Day O Dan Seaman	perations (General Manager):
C. Phone Number of Establishment: 301-299-9300	D. Type of Facility/Facility Concept: Full Service Restaurant
E. Date Applicant will Begin to Operate:	F. Days and Hours of Operation:
September 25, 2023	S-Th 11am-10pm, F-Sat 11am-11pm

A. Names of all Current License Holders:

1) Dora Berman

2) Fred Berman

C. Location of Current Licensed Facility:
10123 River Road, Potomac, MD 20854

SECTION 7: LICENSE TRANSFER (COMPLETE ONLY IF TRANSFERRING A LICENSE)

B. Date Facility Began Operating:

B. Date Facility Began Operating:

D. Location to Which License is Being Transferred:

Transfer of Ownership-Same Locatin

### **SECTION 8: LEASED PREMISES**

A. Name of Property Owner:	B. Phone Number of Property Owner:	C. Full Address of Property Owner:
10121 Trust, Potomac Village Ltd. Partnership, River Falls Ltd. artnership	Donohoe Real Estate Services, 202-333-0880	2101 Wisconsin Avenue NW, Washington, DC 20007
D. Date Lease Made: 1/1/2022		E. Date Lease Expires: 12/31/2026
F. State Renewal Options, if any: five Year Renewal Terms		9.

### **SECTION 9: APPLICANT QUESTIONAIRE**

Has any applicant ever been:

1. Convicted of a felony?	☐ YES ■ NO		
•			
2. Found guilty of violating the laws governing the sale of alcohol in the State of Maryland or the United States?	■ YES □ NO		
3. Found guilty of violating the laws for prevention and gambling in the State of Maryland or the United States?	□ YES ■ NO		
4. Found guilty of any offense against the laws of the State of Maryland or the United States other than a minor	□ YES ■ NO		
traffic offense?			
5: Has any applicant ever had a license for the sale of alcoholic beverages suspended or revoked?	□ YES ■ NO		
6. Has any applicant ever had a license for the sale of alcoholic beverages?	■ YES □ NO		
If YES, state name of applicant, name of facility, address for which license was held, and the dates for which it was held:			
See the attached			
7: Does any applicant or person with an ownership interest in this facility have a financial interest in any other			
facility in Montgomery County or the State of Maryland where an alcoholic beverage license has been applied	■ YES □ NO		
for, granted, or issued under the Alcoholic Beverages Article of the Annotated Code of Maryland?			
If YES, state the name of the applicant, name and address of licensed premises and ownership and add the dawas held:	tes the license		
8: Does any person other than the applicant(s) have any financial interest in this alcoholic beverage license	□ YES ■ NO		
applied for, or in the facility to be conducted under the current license?			
If YES, state name and the financial interest owned:			
L			

#### SECTION 10: CERTIFICATES AND SIC TURES

21. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has is a resident and taxpayer of the State of Maryland; and further certifies that no manufacturer, brewer, distiller or wholesaler has any financial interest, directly or indirectly, in the premises or facility of the applicant; that the applicant will not hereafter convey or grant to such manufacturer, brewer, distiller, or wholesaler any such interest; and that the applicant at the time of making this application has no indebtedness or other financial obligation and will not hereafter incur any such indebtedness or financial obligation to any manufacturer, brewer, distiller, or wholesaler.

Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as, to the rules and regulations of the Board of License Commissioners for Montgomery County, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.

"By signing this application, I do solemnly declare and affirm un	der the penalties of perjury that the contents of the foregoing document are
true and correct to the best of my knowledge, information, and	belief."
(A)	
Signature of Applicant	
(B)	
Signature of Applicant	
(C)	
Signature of Applicant	
(D)	
	(FOR CORPORATION APPLICATIONS ONLY) Corporate President Signature

22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of the property named in the foregoing application for an alcoholic beverage license and that I hereby consent to the use of the said property for the sale thereon of such alcoholic beverages as may be permitted by law, and I do hereby grant permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.

### Affidavit:

Affidavit:

"By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief."

Signature of the Property Owner

managing owners for 10121 Trust, Potomac Village Limital Partnerships Piney spring MHM, LCC, River Falls Cimital Partnership and Saltford LLC

Printed Name of Property Owner

7101 Wisconsin Avenue Phone of Property Owner Address of Property Owner Bettesda MD 20814

### Section 9

### Questions 6 & 7

Adam Greenberg owner of all: Potomac Pizza-9812 Falls Road, Potomac MD 20854-License held since 1998

Potomac Pizza-9709 Traville Gateway Drive, Rockville, MD 20878-License held since 2007;

Potomac Pizza-19 Wisconsin Circle, Chevy Chase, MD 20815; License held since 2009

Potomac Pizza-7777 Baltimore Avenue, College Park, MD 20740-License held since 2016

Potomac Pizza-750 Concourse Circle, Middle River Maryland 21220 License held since 2020